



The Human Tragedy of Proliferation and Nuclear Rearmament

IPPNW Statement at the 2004 NPT PrepCom

Non-governmental organizations from around the world addressed the Third Preparatory Committee for 2005 Non-Proliferation Treaty Review on April 27, 2004, at United Nations Headquarters in New York. The NGOs were joined by Mayor Tadatoshi Akiba of Hiroshima and Mayor Iccoh Itoh of Nagasaki, who were joined by several other participants in the Mayors For Peace nuclear disarmament initiative.

IPPNW prepared the following presentation, which was delivered in abbreviated form by President Ronald S. McCoy on April 27, 2004.

The primary goal of the NPT and of all efforts to rid countries and the world of nuclear weapons is to prevent the human catastrophe that would inevitably result from the use of even a single nuclear weapon. Yet the Treaty today is faced with a daunting array of challenges: national security strategies that confer permanent status to nuclear weapons; the testing and development of new generations of nuclear weapons for new and destabilizing missions; their acquisition by non-nuclear States (and non-state actors) no longer willing to accept the prevailing nuclear apartheid.

Despite the important agreements reached at the NPT Review Conference in 2000, the threat posed by nuclear weapons has increased. When we ask you to consider the human implications of the choice between proliferation and non-proliferation, between disarmament and a perpetual enslavement to nuclear weapons, we are really presenting you with the choice between two futures. Only one of these futures is acceptable or worth pursuing. The NPT will only be an effective tool in that pursuit if the States Parties commit themselves to the urgent task of revitalizing the Treaty as both a non-proliferation and a disarmament agreement. At its heart, this is a choice between hope and hopelessness. We submit to you that we can no longer put off making this choice.

We know what almost 60 years under the nuclear shadow have done to the hundreds of thousands of victims, whether they be hibakusha, downwinders, nuclear industry workers, or communities in the Global South and elsewhere who have been deprived of true health and security because of the enormous amount of resources squandered on acquiring, testing, and developing nuclear weapons. In a more general sense, we are all victims of the preparations for nuclear war, because we are all held hostage to the ever present threat of extinction.

The atomic bombings of Hiroshima and Nagasaki were devastating and cruel. In an instant they created many tens of thousands of fatalities and several hundred thousand surviving victims whose terrible injuries have extended over generations. To achieve the abolition of nuclear weapons, those victims have told their stories of terror and suffering, believing that this is the only way to save human beings from the crisis of extinction. We wish to honor the lives and the voices of the hibakusha here and now. Even more important, we urge the nuclear weapon states and the non-nuclear States Parties to the NPT to listen to their experiences, to learn from them, and to embrace continued human survival by abandoning nuclear weapons and the ambition to acquire them.

Tragically, the world seems to be careening toward disaster. With a dangerous and painfully arrogant US nuclear policy as the model and the driving force, nuclear weapons are seen by far too many countries as conferring a political status contrary to the spirit of the NPT, which has sought their stigmatization. The counter-proliferation strategies championed by the Bush administration and supported by several other governments, while they contain some useful elements, serve in the end to reinforce a nuclear double standard. According to the administration, the weapons themselves are not the threat to our survival, but only their ownership by "evildoers." The "evildoers" themselves, of course, are defined as such by the sole remaining nuclear superpower and its allies, thus turning

nuclear proliferation -- and the need for aggressive counter-proliferation measures -- into a self-fulfilling prophecy.

What will happen in a future where nuclear testing resumes in the US and other nuclear weapon states in order to facilitate the development of a new generation of nuclear weapons with battlefield uses? Where additional countries rebel against nuclear apartheid and start testing and developing nuclear weapons and delivery systems of their own? Where national security is ultimately measured by the capacity to destroy, rather than by the willingness to resolve the inevitable conflicts through negotiation and diplomacy, without resort to arms? Where investments in the health, education, and development of communities are sacrificed in order to sustain nuclear weapons programs that bankrupt all legitimate paths to global security?

We can predict with confidence -- and from experience -- that a resumption of nuclear weapons production and testing will have a direct and destructive impact on the communities surrounding the test sites. IPPNW and IEER documented these health and environmental impacts in a series of studies published in the 1990s, and we have reviewed the damage in previous statements before this body. Rather than go over old ground, we wish to focus here on two sites that have had troubled histories and that could become a source of new health and environmental disasters if the global pursuit of nuclear weapons expands and continues.

We are extremely concerned, as other speakers have mentioned, that the decade-long testing moratorium may be broken by the US, which is even now bringing its nuclear weapons manufacturing complex up to speed in preparation for additions to its arsenal. The Savannah River Site (SRS) -- a 310-square-mile complex of closed nuclear weapons facilities and decontamination activities located in South Carolina -- made plutonium and tritium for atomic weapons from 1950 to 1990. SRS is now a leading contender for a new weapons plant that would construct up to 900 new plutonium warhead "pits" annually. This will inevitably increase radiation exposure to the public -- as much as 2.6% above existing radiation levels from all facilities at SRS.³ The environmental and human impacts of this deadly business are tragic, because we are robbing from the future when we damage the environment with nuclear waste.

The shallow groundwater at SRS is severely contaminated with tritium, TCE, and other pollutants. While the water in the Savannah River is still within drinking water standards, radioactive tritium has already been found in drinking water more than 100 river miles downstream from SRS at Beaufort, SC. SRS is out of compliance with the federal Clean Air Act.¹ Recent evidence indicates that radioactive pollution< cesium 137, strontium 90 and cobalt 60< is between 20 and 100 times background downstream of the old atomic weapons facilities, depending on how one measures natural background relative to fallout from atmospheric testing.²

Cancer, of course, is linked to ionizing radiation. A half century of radioactive contamination is causing an invisible yet real epidemic. The cumulative impact of new plutonium plants and past contamination at SRS would result in more death and disease to the people in this region.

While India and Pakistan are not States Parties to the NPT, their role in global proliferation cannot be ignored, especially since the infrastructure for testing and producing nuclear weapons poses grave threats to the Indian and Pakistani people. We cite here the damage caused by uranium mining in India, where a good deal of new information has come to light during the past year or two.

Uranium ore has been mined and processed in Jaduguda, in Bihar State, for some 30 years. Local NGOs have surveyed area villages and have reported 70 cases of infants born with congenital deformities, of which 60 were in villages close to the plant operated by the Uranium Corporation of India. Children in the affected areas are sometimes born with polydactyl (extra fingers or toes) and syndactyl (fused or missing fingers and toes) appendages. Dr. Surendra Gadekar, of the Gujarat-based NGO Sampoorna Kranti Vidyalaya Vedchhi, has attributed the unusual increase in birth defects, as well as increased rates of lung cancer and silicosis, to occupational exposures.

New mines proposed for the Nalgonda district will only compound the problems. Exposure to radioactive-decay products and heavy metals affects the brain, kidneys, liver, and other organs. Long term environmental damage results from radioactive tailings and the dumping of 99.8% of the mined ore, which seeps into soil and groundwater. The Nagarjunasagar dam is very near one of the new mining sites and is likely to be contaminated with uranium from storm water runoff. Radioactive dust and tailings will probably contaminate a new reservoir that will supply drinking water to Hyderabad, and could affect both human and wildlife health.

The public -- not only in the US and in India but in all countries where nuclear materials are processed -- is routinely denied information about health hazards related to plant operations and waste disposal. Such callous disregard is all too typical of official attitudes and behaviors when the acquisition of nuclear weapons, rather than human health and well being, is the object of policy.

If the human costs associated with the pursuit of nuclear weapons were tabulated in full we would be appalled. But such accountings are almost never made, even in part, and the victims are usually abandoned to suffer in the shadows. In 1997, for example, the US National Cancer Institute NCI projected tens of thousands of additional thyroid cancers as a result of years of atmospheric nuclear testing, yet no funds have been dedicated to identifying, monitoring, or treating the most vulnerable populations. In short, nuclear weapons are instruments of genocide unlike any others. They are weapons not just of mass destruction, but of ultimate destruction.

The proliferation of all types of weapons of mass destruction (WMD) has always been a threat to international peace and security, but this threat has increased since the 2000 NPT Review. The nuclear weapons breakout by India and Pakistan, the recent revelation of A. Q. Khan's black market in nuclear technology, and the nascent weapons programs in North Korea and Libya, are a wake-up call to the international community. Yet in addressing proliferation, there is a parallel need to address and implement disarmament, because disarmament and non-proliferation are two sides of the same coin. The axiom of proliferation is indisputable: the possession of nuclear weapons by any state is a constant stimulus to other state and non-state actors to acquire them.

To physicians, the deliberate use of disease as a weapon of war is particularly repugnant, but even more repugnant is the use of nuclear weapons. In a nuclear war, there can be no meaningful medical response. Long-term radiation effects could blight unborn generations; civilization itself could come to an end.

One of the most disturbing justifications being offered by the Bush administration for continued US reliance on nuclear weapons and, indeed, for the development of new types of nuclear weapons with specific battlefield uses, is the intent to provide a nuclear response to chemical and biological weapons threats. (This intent, by the way, was echoed by Israel -- another nuclear weapon state that is not a Party to the NPT -- during the weeks preceding the US-led invasion of Iraq.) This has led to a tendency to group nuclear, chemical, and biological weapons together into an amorphous category called "weapons of mass destruction." We do not wish to minimize the horrors of chemical and biological weapons or to suggest that the threat of their use by terrorist groups or State parties to armed conflict is insubstantial or unworthy of serious response.

Nuclear weapons, however, are in a class of their own and the threat they pose must under no circumstances be equated with the threat posed by chemical and biological weapons. Nor should they be linked with chemical and biological weapons as part of an interchangeable strategy of deterrence or retaliation.

Chemical warfare agents, such as mustard gas, lewisite, sarin, and tabun, can cause a range of lethal and non-lethal effects from blistering and nausea to respiratory tract damage, seizures, and paralysis. More than 100,000 tons of toxic chemicals used during the First World War caused the deaths of 90,000 soldiers and more than a million casualties. The use of chemical weapons by Iraq during its 1980-88 war with Iran resulted in hundreds of documented deaths and injuries; Iran has claimed as many as 100,000. Iraqi aircraft shelled the Kurdish village of Halabja, in northern Iraq, with chemical weapons on March 16, 1988, killing 5-8,000 people and injuring 7,000. There is also evidence of Iranian use of chemical weapons.

In 1932, Japan attacked several Chinese cities with biological agents including anthrax, cholera, shigellosis, salmonella, and plague, killing at least 10,000 people. An anthrax epizootic in 1979 and 1980 during the Zimbabwe civil war took 182 lives and may have been deliberate. About 5,000 people were exposed to inhalation anthrax in Sverdlovsk in 1979 -- the result of an aerosol emission from a military biological facility. About 70 people died. Depending on the biological agent used and the effectiveness of dispersal, a city of 500,000 people might suffer anywhere from a few hundred to several thousand deaths and tens of thousands of injuries.

Such effects certainly warrant characterizing chemical and biological weapons as "weapons of mass destruction." Nevertheless, the consequences of nuclear weapons are exponentially greater. Moreover, there is no medical response to nuclear war something that is not universally true of chemical and biological attacks. The explosion of a single modern nuclear warhead over a major city

could cause hundreds of thousands -- even millions -- of deaths in a matter of moments. Blast, burn, and radiation injuries among the survivors would overwhelm any possible medical response. Long term health consequences, including leukemias and other cancers would affect the survivors and their children throughout entire lifetimes. Other genetic effects would persist across generations. Hospitals and other medical infrastructure would be destroyed in the overall carnage, rendering the kind of medical response that would be available in the aftermath of a chemical or biological attack virtually inconceivable. Vast areas of land stretching out from the epicenter of a nuclear explosion would remain uninhabitable for years, while contamination from radioactive fallout would persist in some places for hundreds, or even thousands of years, causing new illnesses in future generations. An all-out nuclear war involving a significant number of the weapons that are currently held by the nuclear weapon states could initiate a nuclear winter, threatening the extinction of human and countless non-human species.

To categorize nuclear, chemical, and biological weapons together under the single rubric "weapons of mass destruction," without making these fundamental distinctions of scale of destructive effect, betrays a lack of understanding. To do so for the political purpose of defining uses for nuclear weapons against chemical and biological threats -- for example, nuclear-armed bunker busters designed to destroy underground chemical or biological weapons facilities -- or to threaten nuclear retaliation against a chemical or biological attack, is a cynical betrayal of the global responsibility to ensure that these weapons are never used again.

Paradoxically, the world's largest nuclear power is even now caught up in the tragic aftermath of a war that it sought out on the pretext that Iraq had nuclear weapons and other weapons of mass destruction. Neither the US nor the UK would rule out the use of their own nuclear weapons in the run up to the war. Moreover, the invading forces fired at least 1,000 tons -- possibly 2,000 tons or more -- of depleted uranium shells during the 2003 war against Iraq, as compared with 350 tons in 1991. While not nuclear weapons, DU munitions contaminate the environment where they are used with a radioactive and toxic chemical stew that has been implicated in childhood cancers and other illnesses reported among troops and civilians. Seen in this context, DU weapons are part of a continuum of radiological, chemical, biological, and, finally, nuclear weapons that flies in the face of NPT goals. We therefore urge NPT Member States to sponsor a General Assembly resolution condemning the use of DU weapons and all uranium-tipped, radiological weapons.

The path toward the future in which the shadow of nuclear war is forever lifted requires bold steps that must be taken today.

First, the nuclear double standard has to end, and the process of complete global nuclear disarmament has to begin. It is long past time for the nuclear weapon states to concede that the fundamental problem with nuclear weapons is the existence of the weapons themselves, not the intentions of their owners. In plain language, the United States, Russia, China, France, the UK, Israel, India, and Pakistan must stop making excuses for their own nuclear arsenals while pretending, to varying degrees, that proliferation is the only real problem.

Second, the CTBT must enter into force, and all forms of nuclear testing, including sub-critical testing, must be prohibited. This body should explicitly condemn the creation of new justifications for a new generation of nuclear weapons that will become the excuses for new rounds of nuclear test explosions.

Third, the States parties to the NPT and the participants in all disarmament and arms control forums must insist upon the separation of nuclear weapons from chemical and biological weapons in both policy and rhetoric. At the same time, the States Parties to the NPT must recognize that the weakening of verification and enforcement measures related to the treaties prohibiting chemical and biological weapons have a negative impact on prospects for nuclear non-proliferation and disarmament. The reliance on nuclear weapons for security creates insecurity and fuels not only the proliferation of nuclear weapons, but also the desire for biological and chemical weapons. Wherever possible, those concerned with nuclear disarmament and non-proliferation agreements should make common cause with those responsible for implementing the Biological Weapons Convention and the Chemical Weapons Convention, in pursuit of effective and mutually reinforcing systems for verification and enforcement.

Finally, the NPT itself must be transformed into a true disarmament and non-proliferation treaty, as was the intent of the States Parties in 2000 when they committed themselves to an

"unequivocal undertaking" to rid the world of nuclear weapons. Negotiations on a time-bound framework to eliminate nuclear weapons by 2020 must begin no later than the close of the 2005 NPT Review.

Endnotes

1. Comments re: Part 70 Air Quality Permit No. TV-0080-0041, US Department of Energy, Westinghouse Savannah River Company-Savannah River Site, BREDL, November 21, 2002
2. Under A Cloud: Fallout from the Savannah River Site, The RadioActivist Campaign, October 2003
3. MOX Fuel Fabrication Facility Environmental Report, Revision 1 & 2, NRC Docket No. 070-03098, DOE Contract DE-AC02-99-CH10888

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